

2023

Instructions for Forms 1094-C and 1095-C

Volume 1 of 2



Department of the Treasury
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Section references are to the Internal Revenue Code unless otherwise noted.

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Future Developments

For the latest information about developments related to Form 1094-C, Transmittal of Employer-Provided Health Insurance Offer and Coverage Information Returns, and Form 1095-C, Employer-Provided Health Insurance Offer and Coverage, and the instructions, such as legislation enacted after they were published, go to [IRS.gov/Form1094C](https://www.irs.gov/Form1094C) and [IRS.gov/Form1095C](https://www.irs.gov/Form1095C).

What's New

The electronic-filing threshold for information returns required to be filed on or after January 1, 2024, has been decreased to 10 or more returns. See [Electronic Filing](#), later.

Additional Information

For information related to the Affordable Care Act, visit [IRS.gov/ ACA](https://www.irs.gov/ACA). For the final regulations under section 6056, Information

Reporting by Applicable Large Employers on Health Insurance Coverage Offered Under Employer-Sponsored Plans, see T.D. 9661, 2014-13 I.R.B. 855, at [IRS.gov/irb/2014-13_IRB/ar09.html](https://www.irs.gov/irb/2014-13_IRB/ar09.html). For the final regulations under section 6055, Information Reporting of Minimum Essential Coverage, see T.D. 9660, 2014-13 I.R.B. 842, at [IRS.gov/irb/2014-13_IRB/ar08.html](https://www.irs.gov/irb/2014-13_IRB/ar08.html) and T.D. 9970, 2023-02 I.R.B. 311, at [IRS.gov/irb/2023-02_IRB](https://www.irs.gov/irb/2023-02_IRB). For the final regulations under section 4980H, Shared Responsibility for Employers Regarding Health Coverage, see T.D. 9655, 2014-9 I.R.B. 541, at [IRS.gov/irb/2014-9_IRB/ar05.html](https://www.irs.gov/irb/2014-9_IRB/ar05.html). For answers to frequently asked questions regarding the employer shared responsibility provisions and related information reporting requirements, visit [IRS.gov](https://www.irs.gov).

For information related to filing Forms 1094-C and 1095-C electronically, visit [IRS.gov/AIR](https://www.irs.gov/AIR). For FAQs specifically related to completing

Forms 1094-C and 1095-C, go to [IRS.gov/Affordable-Care-Act/Employers/Questions-and-Answers-about-Information-Reporting-by-Employers-on-Form-1094-C-and-Form-1095-C](https://www.irs.gov/Affordable-Care-Act/Employers/Questions-and-Answers-about-Information-Reporting-by-Employers-on-Form-1094-C-and-Form-1095-C).

For additional guidance and proposed regulatory changes relating to section 6055, including the requirement to solicit the TIN of each covered individual for purposes of the reporting of health coverage information, see Proposed Regulations section 1.6055-1(h) and Regulations section 301.6724-1.

General Instructions for Forms 1094-C and 1095-C

See [Definitions](#), later, for key terms used in these instructions.

Purpose of Form

Employers with 50 or more full-time employees (including full-time equivalent employees) in the previous year use Forms 1094-C and 1095-C to report the information required under sections 6055 and 6056 about offers of health coverage and enrollment in health coverage for their employees. Form 1094-C must be used to report to the IRS summary information for each Applicable Large Employer (ALE Member) (defined below) and to transmit Forms 1095-C to the IRS. Form 1095-C is used to report information about each employee to the IRS and to the employee. Forms 1094-C and 1095-C are used in determining whether an ALE Member owes a payment under the

employer shared responsibility provisions under section 4980H. Form 1095-C is also used in determining the eligibility of employees for the premium tax credit.

ALE Members that offer employer-sponsored, self-insured coverage also use Form 1095-C to report information to the IRS and to employees about individuals who have minimum essential coverage under the employer plan.

Who Must File

An ALE Member must file one or more Forms 1094-C (including a Form 1094-C designated as the Authoritative Transmittal, whether or not filing multiple Forms 1094-C), and must file a Form 1095-C for each employee who was a full-time employee of the ALE Member for any month of the calendar year.

Generally, the ALE Member is required to furnish a copy of the Form 1095-C (or a substitute form) to the employee.

An ALE Member is, generally, a single person or entity that is an Applicable Large Employer, or if applicable, each person or entity that is a member of an Aggregated ALE Group. An Applicable Large Employer, generally, is an employer with 50 or more full-time employees (including full-time equivalent employees) in the previous year. For purposes of determining if an employer or group of employers is an Applicable Large Employer, all ALE Members under common control (an Aggregated ALE Group) are aggregated together. If the Aggregated ALE Group, taking into account the employees of all ALE Members in the group, employed on average 50 or more

full-time employees (including full-time equivalent employees) on business days during the preceding calendar year, then the Aggregated ALE Group is an Applicable Large Employer and each separate employer within the group is an ALE Member.

Each ALE Member is required to file Forms 1094-C and 1095-C reporting offers of coverage to its full-time employees (even if the ALE Member has fewer than 50 full-time employees of its own).

For more information on which employers are subject to the employer shared responsibility provisions of section 4980H, see [Employer](#) in the *Definitions* section of these instructions.

For more information on determining full-time employees, see [Full-Time Employee](#) in the *Definitions* section of these instructions, which includes information on the treatment of new hires and employees in Limited Non-Assessment Periods.



For purposes of reporting on Forms 1094-C and 1095-C, an employee in a Limited Non-Assessment Period is not considered a full-time employee during that period.

Reporting by Employers That Sponsor Self-Insured Health Plans

An employer that offers health coverage through a self-insured health plan must report information about each individual enrolled in such coverage. For an employer that is an ALE Member, this information must be reported on Form 1095-C, Part III, for any employee who is enrolled in coverage (and any spouse or dependent of that employee). See the option to file Form 1094-B and Form 1095-B, rather than Form 1094-C and Form 1095-C, to report coverage of certain non-employees, below.

ALE Members that offer health coverage through an employer-sponsored, self-insured health plan must complete Form 1095-C, Parts I, II, and III, for any employee who enrolls in the health coverage, whether or not the employee is a full-time employee for any month of the calendar year.

For full-time employees enrolled in an ALE Member's self-insured coverage, including an employee who was a full-time employee for at least 1 month of the calendar year, the ALE Member must complete Form 1095-C, Part II, according to the generally applicable instructions, and should not enter code 1G on line 14 for any month. For an employee enrolled in an ALE Member's self-insured coverage who is not a full-time employee for any month of the calendar year (meaning that for all 12 calendar months the employee was not a full-time employee), for Form 1095-C, Part II, the ALE Member must enter code 1G on line 14 in the "All 12 Months" column or in the separate monthly boxes for all 12 calendar months, and the ALE Member need not complete Part II, lines 15 and 16.



An individual coverage HRA is a self-insured group health plan and is therefore an eligible employer-sponsored plan. An individual is ineligible for a

premium tax credit (PTC) for a month if the individual is covered by an individual coverage HRA or eligible for an individual coverage HRA that is affordable.

An employer that offers employer-sponsored, self-insured health coverage but is not an ALE Member should not file Forms 1094-C and 1095-C, but should instead file Forms 1094-B and 1095-B to report information for employees who enrolled in the employer-sponsored, self-insured health coverage.

Note. If an ALE Member is offering health coverage to employees other than under a self-insured plan, such as through an insured health plan or a multiemployer health plan, the issuer of the insurance or the sponsor of the plan providing the coverage is required to furnish the information about their health coverage to any enrolled employees, and the ALE Member should not complete Form 1095-C, Part III, for those employees.

Reporting of Enrollment Information for Non-Employees: Option To Use Forms 1094-B and 1095-B

ALE Members that offer employer-sponsored, self-insured health coverage to non-employees who enroll in the coverage may use Forms 1094-B and 1095-B, rather than Form 1095-C, Part III, to report coverage for those individuals and other family members. For this purpose, a non-employee includes, for example, a non-employee director, an individual who was a retired employee during the entire year, or a non-employee COBRA beneficiary, including a former employee who terminated employment during a previous year.

For information on reporting for non-employees enrolled in an employer-sponsored, self-insured health plan using

Forms 1094-B and 1095-B, see the instructions for those forms.

For ALE Members that choose to use Form 1095-C to report coverage information for non-employees enrolled in an employer-sponsored, self-insured health plan, see the specific instructions for Form 1095-C, [*Part III—Covered Individuals \(Lines 18–30\)*](#), later. Form 1095-C may be used only if the individual identified on line 1 has an SSN.

Substitute Statements to Recipients

If you are not using the official IRS form to furnish statements to recipients, see Pub. 5223, General Rules and Specifications for Affordable Care Act Substitute Forms 1095-A, 1094-B, 1095-B, 1094-C, and 1095-C, which explains the requirements for format and content of substitute statements to recipients. You may develop them yourself or buy them from a private printer.

Substitute statements furnished to recipients may be in portrait format; however, substitute returns filed with the IRS using paper must be printed in landscape format.

Authoritative Transmittal for ALE Members Filing Multiple Forms 1094-C

A Form 1094-C must be filed when an ALE Member files one or more Forms 1095-C. An ALE Member may choose to file multiple Forms 1094-C, each accompanied by Forms 1095-C for a portion of its employees, provided that a Form 1095-C is filed for each employee for whom the ALE Member is required to file. If an ALE Member files more than one Form 1094-C, one (and only one) Form 1094-C filed by the ALE Member must be identified on line 19, Part I, as the Authoritative Transmittal, and, on the Authoritative Transmittal, the ALE Member must report certain aggregate data for all full-

time employees and all employees, as applicable, of the ALE Member.

Example 1. Employer A, an ALE Member, files a single Form 1094-C, attaching Forms 1095-C for each of its 100 full-time employees. This Form 1094-C should be identified as the Authoritative Transmittal on line 19, and the remainder of the form completed as indicated in the instructions for [line 19](#), later.

Example 2. Employer B, an ALE Member, files two Forms 1094-C, one for each of its two operating divisions, Division X and Division Y. (Division X and Division Y are units of the same ALE Member, and thus both report under the same employer identification number (EIN); they are not members of an Aggregated ALE Group.) Attached to one Form 1094-C are Forms 1095-C for the 200 full-time employees of Division X, and attached to the other Form 1094-C are Forms 1095-C for the 1,000 full-time employees of

Division Y. One of these Forms 1094-C should be identified as the Authoritative Transmittal on line 19, and should include aggregate employer-level data for all 1,200 full-time employees of Employer B as well as the total number of employees of Employer B, as applicable, as required in Parts II, III, and IV of Form 1094-C. The other Form 1094-C should not be identified as the Authoritative Transmittal on line 19, and should report on line 18 only the number of Forms 1095-C that are attached to that Form 1094-C, and should leave the remaining sections of the form blank, as indicated in the instructions for [line 19](#), later.

Note. Each ALE Member must file its own Forms 1094-C and 1095-C under its own separate EIN, even if the ALE Member is part of an Aggregated ALE Group. No Authoritative Transmittal should be filed for an Aggregated ALE Group.

Example 3. Assume that Employer A from *Example 1* is a member of the same Aggregated ALE Group as Employer B from *Example 2*. Accordingly, Employer A and Employer B are separate ALE Members filing under separate EINs. Forms 1094-C should be filed in the same manner indicated in *Examples 1* and *2*. Employer A should include only information about employees of Employer A in its Authoritative Transmittal, and Employer B should include only information about employees of Employer B in its Authoritative Transmittal. No Authoritative Transmittal should be filed for the Aggregated ALE Group reporting combined data for employees of both Employer A and Employer B.

Similar rules apply for a Governmental Unit that has delegated its reporting responsibilities for some of its employees to another Governmental Unit—see [*Designated Governmental Entity \(DGE\)*](#) in the *Definitions*

section of these instructions for more information. In the case of a Governmental Unit that has delegated its reporting responsibilities for some of its employees, the Governmental Unit must ensure that among the multiple Forms 1094-C filed by or on behalf of the Governmental Unit transmitting Forms 1095-C for the Governmental Unit's employees, one of the filed Forms 1094-C is designated as the Authoritative Transmittal and reports aggregate employer-level data for the Governmental Unit, as required in Parts II, III, and IV of Form 1094-C.

Example. County is an Aggregated ALE Group made up of the ALE Members School District, the Police District, and the County General Office. The School District designates the state to report on behalf of the teachers and reports for itself for its remaining full-time employees. In this case, either the School District or the state must file an

Authoritative Transmittal reporting aggregate employer-level data for the School District.

One Form 1095-C for Each Employee of ALE Member

For each full-time employee of an ALE Member, there must be only one Form 1095-C filed for employment with that ALE Member. For example, if an ALE Member separately reports for each of its two divisions, the ALE Member must combine the offer and coverage information for any employee who worked at both divisions during the calendar year so that a single Form 1095-C is filed for the calendar year for that employee, which reports information for all 12 months of the calendar year from that ALE Member.

In contrast, a full-time employee who works for more than one ALE Member that is a member of the same Aggregated ALE Group must receive a separate Form 1095-C from each ALE Member. For any calendar month in

which a full-time employee works for more than one ALE Member of an Aggregated ALE Group, only one ALE Member is treated as the employer of that employee for reporting purposes (generally, the ALE Member for whom the employee worked the greatest number of hours of service), and only that ALE Member reports for that employee for that calendar month. The other ALE Member is not required to report for that employee for that calendar month, unless the other ALE Member is otherwise required to file Form 1095-C for that employee because the individual was a full-time employee of that ALE Member for a different month of the same calendar year. In this case, the individual may be treated as not employed by that ALE Member for that calendar month. If under these rules, an ALE Member is not required to report for an employee for any month in the calendar year, the ALE Member is not required to report for that full-time employee for that calendar year. For a

description of the rules related to determining which ALE Member in an Aggregated ALE Group is treated as the employer for a month in this situation, see the definition of [Employee](#).

Example. Employer A and Employer B are separate ALE Members that belong to the same Aggregated ALE Group. Both Employer A and Employer B offer coverage through the AB health plan, which is an insured plan. In January and February, Employee has 130 hours of service for Employer A and no hours of service for Employer B. In March, Employee has 100 hours of service for Employer A and 30 hours of service for Employer B. In April through December, Employee has 130 hours of service for Employer B and no hours of service for Employer A. Employer A is the employer of Employee for filing purposes for January, February, and March. Employer A should file Form 1095-C for Employee reporting offers of

coverage using the appropriate code on line 14 for January, February, and March; should complete lines 15 and 16 per the instructions; and should include Employee in the count of total employees and full-time employees reported for those months on Form 1094-C. For the months April through December, on Form 1095-C, Employer A should enter code 1H (no offer of coverage) on line 14, leave line 15 blank, and enter code 2A (not an employee) on line 16 (since Employee is treated as an employee of Employer B and not as an employee of Employer A in those months), and should exclude Employee from the count of total employees and full-time employees reported for those months on Form 1094-C.

When To File

You will meet the requirement to file Forms 1094-C and 1095-C if the forms are properly addressed and mailed on or before the due date. If the due date falls on a weekend or

legal holiday, then the due date is the following business day. A business day is any day that is not a Saturday, Sunday, or legal holiday.

Generally, you must file Forms 1094-C and 1095-C by February 28 if filing on paper (or March 31 if filing electronically) of the year following the calendar year to which the return relates. For calendar year 2023, Forms 1094-C and 1095-C are required to be filed by February 28, 2024, or April 1, 2024, if filing electronically.

See [*Furnishing Forms 1095-C to Employees*](#) for information on when Form 1095-C must be furnished.

Extensions

You can get an automatic 30-day extension of time to file by completing Form 8809, Application for Extension of Time To File Information Returns. The form may be

submitted on paper, or through the FIRE System either as a fill-in form or an electronic file. No signature or explanation is required for the extension. However, you must file Form 8809 on or before the due date of the returns in order to get the 30-day extension. Under certain hardship conditions, you may apply for an additional 30-day extension. See the Instructions for Form 8809 for more information.

How to apply. File Form 8809 as soon as you know that a 30-day extension of time to file is needed. See the instructions for Form 8809. Mail or fax Form 8809 using the address and phone number listed in the instructions. You can also submit the extension request online through the FIRE System. You are encouraged to submit requests using the online fill-in form. See Pub. 1220 for more information on filing online or electronically.

Where To File

Send all information returns filed on paper to the following:

If your principal business, office or agency, or legal residence, in the case of an individual, is located in:



Alabama, Arizona,
Arkansas,
Connecticut,
Delaware, Florida,
Georgia, Kentucky,
Louisiana, Maine,
Massachusetts,
Mississippi, New

Use the following address:



Department of the
Treasury Internal
Revenue Service
Center Austin, TX
73301

Hampshire, New
Jersey, New Mexico,
New York, North
Carolina, Ohio,
Pennsylvania, Rhode
Island, Texas,
Vermont, Virginia,
West Virginia

Alaska, California,
Colorado, District of
Columbia, Hawaii,
Idaho, Illinois,
Indiana, Iowa,
Kansas, Maryland,
Michigan, Minnesota,
Missouri, Montana,
Nebraska, Nevada,
North Dakota,
Oklahoma, Oregon,
South Carolina, South
Dakota, Tennessee,

Department of the
Treasury Internal
Revenue Service
Center P.O. Box
219256 Kansas City,
MO 64121-9256

Utah, Washington,
Wisconsin, Wyoming

If your legal residence or principal place of business or principal office or agency is outside the United States, file with the Department of the Treasury, Internal Revenue Service Center, Austin, TX 73301.

Shipping and mailing. If you are filing on paper, send the forms to the IRS in a flat mailing (not folded), and do not paperclip or staple the forms together. If you are sending many forms, you may send them in conveniently sized packages. On each package, write your name, number the packages consecutively, and place Form 1094-C in package number one. Postal regulations require forms and packages to be sent by First-Class Mail. Returns filed with the IRS must be printed in landscape format.

Keeping copies. Generally, keep copies of information returns you filed with the IRS or have the ability to reconstruct the data for at least 3 years, from the due date of the returns.

Electronic Filing



If you are required to file 10 or more information returns during the year, you must file the forms electronically. The 10-or-more requirement applies in the aggregate to certain information returns that are original or corrected returns.

Accordingly, a filer may be required to file fewer than 10 Forms 1094-C and 1095-C, but still have an electronic filing obligation based on other kinds of information returns filed. The electronic filing requirement does not apply if you request and receive a hardship waiver. The IRS encourages you to file

electronically even though you are filing fewer than 10 returns.

Waiver. To receive a waiver from the required filing of information returns electronically, submit Form 8508. You are encouraged to file Form 8508 at least 45 days before the due date of the returns, but no later than the due date of the return. The IRS does not process waiver requests until January 1 of the calendar year the returns are due. You cannot apply for a waiver for more than 1 tax year at a time. If you need a waiver for more than 1 tax year, you must reapply at the appropriate time each year. If a waiver for original returns is approved, any corrections for the same types of returns will be covered under the waiver. However, if you submit original returns electronically but you want to submit your corrections on paper, a waiver must be approved for the corrections if you must file 10 or more corrections. If you receive an approved waiver, do not send a

copy of it to the service center where you file your paper returns. Keep the waiver for your records only.

If you are required to file electronically but fail to do so, and you do not have an approved waiver, you may be subject to a penalty of \$310 per return for failure to file electronically unless you establish reasonable cause.

However, you can file up to 10 returns on paper; those returns will not be subject to a penalty for failure to file electronically. The penalty applies separately to original returns and corrected returns.

Pub. 5165, Guide for Electronically Filing Affordable Care Act (ACA) Information Returns for Software Developers and Transmitters, specifies the communication procedures, transmission formats, business rules, and validation procedures, and explains when a return will be accepted, accepted with errors, or rejected, for returns filed electronically for calendar year 2023 through

the ACA Information Return (AIR) system. To develop software for use with the AIR system, software developers, transmitters, and issuers, including ALE Members filing their own Forms 1094-C and 1095-C, should use the guidelines provided in Pub. 5165 along with the Extensible Markup Language (XML) Schemas published on IRS.gov.

Reminder. The formatting directions in these instructions (for example, the directions to enter the 9-digit EIN, including the dash on line 2 of Form 1094-C) are for the preparation of paper returns. When filing forms electronically, the formatting set forth in the XML Schemas and Business Rules published on IRS.gov must be followed rather than the formatting directions in these instructions. For more information regarding electronic filing, see Pubs. 5164 and 5165.

Substitute Returns Filed With the IRS

If you are filing your returns on paper, see Pub. 5223 for specifications for private printing of substitute information returns. You may not request special consideration. Only forms that conform to the official form and the specifications in Pub. 5223 are acceptable for filing with the IRS. Substitute returns filed with the IRS must be printed in landscape format.

VOID Box

Do not use this box on Form 1095-C.

Corrected Forms 1094-C and 1095-C



For information about filing corrections electronically, see section 7.1 of Pub. 5165.

Corrected Returns

A corrected return should be filed as soon as possible after an error is discovered. File the corrected returns as follows.

Form 1094-C. If correcting information on the Authoritative Transmittal (identified on Part I, line 19, as the Authoritative Transmittal, one (and only one) of which must be filed for each ALE Member reporting aggregate employer-level data for all full-time employees and employees of the ALE Member), file a standalone, fully completed Form 1094-C, including the correct information, and enter an "X" in the "CORRECTED" checkbox. Do not file a return correcting information on a Form 1094-C that is not the Authoritative Transmittal.



Do not file any other documents (for example, Form 1095-C) with the corrected Authoritative Transmittal.

Form 1095-C. If correcting information on a Form 1095-C that was previously filed with the IRS, file a fully completed Form 1095-C, including the correct information and enter an "X" in the "CORRECTED" checkbox. File a Form 1094-C (**do not** mark the "CORRECTED" checkbox on Form 1094-C) with corrected Form(s) 1095-C. Furnish the employee a copy of the corrected Form 1095-C, unless the ALE Member was, and continues to be, eligible for and used the alternative method of furnishing under the Qualifying Offer Method for that employee for that year's furnishing. For more information, see [Alternative method of furnishing Form 1095-C to employees under the Qualifying Offer Method.](#)

Forms 1095-C filed with incorrect dollar amounts on line 15, Employee Required Contribution, may fall under a safe harbor for certain de minimis errors. The safe harbor generally applies if no single amount in error differs from the correct amount by more than

\$100. If the safe harbor applies, you will not have to correct Form 1095-C to avoid penalties. However, if the recipient elects for the safe harbor not to apply, you may have to issue a corrected Form 1095-C to avoid penalties. For more information, see Notice 2017-9, 2017-4 I.R.B. 542, at [IRS.gov/irb/2017-04 IRB/ar11.html](https://www.irs.gov/irb/2017-04_IRB/ar11.html).

Note. Enter an “X” in the “CORRECTED” checkbox only when correcting a Form 1095-C previously filed with the IRS. If you are correcting a Form 1095-C that was previously furnished to a recipient, but not filed with the IRS, write, type, or print “CORRECTED” on the new Form 1095-C furnished to the recipient.

Correcting information affecting statement furnished to employee using an Alternative Furnishing Method under the Qualifying Offer Method. If an ALE Member eligible to use the Qualifying Offer Method had furnished the employee an

alternative statement, the ALE Member must furnish the employee a corrected statement if it filed a corrected Form 1095-C correcting the ALE Member's name, EIN, address, or contact name and telephone number. If the ALE Member is no longer eligible to use an alternative furnishing method for the employee for whom it filed a corrected Form 1095-C, it must furnish a Form 1095-C to the employee and advise the employee that Form 1095-C replaces the statement it had previously furnished.



If you fail to file correct information returns or fail to furnish a correct recipient statement, you may be subject to a penalty. However, you are not required to file corrected returns for missing or incorrect TINs if you meet the reasonable cause criteria. For additional information, see Pub. 1586, Reasonable Cause Regulations and Requirements for Missing and Incorrect Name/TINs on Information Returns.



See the charts for examples of errors and step-by-step instructions for filing corrected returns.

Original Authoritative Transmittal Form 1094-C	
IF any of the following are incorrect ...	THEN ...
ALE Member or Designated Government Entity (Name and/or EIN)	1. Prepare a new Authoritative Transmittal, Form 1094-C.
Total number of Forms 1095-C filed by and/or on behalf of ALE Member	2. Enter an "X" in the "CORRECTED" checkbox at the top of the form.

<p>Aggregated ALE Group Membership</p> <p>Certifications of Eligibility</p> <p>Minimum Essential Coverage Offer Indicator</p> <p>Section 4980H Full-Time Employee Count for ALE Member</p> <p>Aggregated Group Indicator</p> <p>Other ALE Members of Aggregated ALE</p>	<p>3. Submit the standalone corrected Form 1094-C with the correct information present.</p>
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Group (Name and/or EIN)	
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**Original Form 1095-C Submitted to IRS
and Furnished to Employee**

IF any of the following are incorrect ...	THEN ...
Name, SSN, ALE Member EIN	1. Prepare a new Form 1095-C.
Offer of Coverage (line 14)	2. Enter an "X" in the "CORRECTED" checkbox at the top of the form.
Employee Required Contribution	3. Submit corrected Forms 1095-C with a non-authoritative Form 1094-C transmittal to the IRS.

Section 4980H Safe Harbor and Other Relief Codes (line 16)	4. Furnish a corrected Form 1095-C to the employee.
Covered Individuals Information	

Original Alternative Furnishing Method Under the Qualifying Offer Method Statement Furnished to Employee	
IF any of the following are incorrect ...	THEN ...
Name, SSN, ALE Member EIN	Submission to the IRS: 1. Prepare a new Form 1095-C.

Offer of Coverage

2. Enter an "X" in the "CORRECTED" checkbox at the top of the form.

3. Submit corrected Form 1095-Cs with a non-authoritative Form 1094-C transmittal to the IRS.

Furnish to employee:

If, after the correction, the ALE Member is still eligible to use the alternative furnishing method under the Qualifying Offer Method, furnish the employee either a Form

	<p>1095-C or corrected statement.</p> <p>If the ALE Member is no longer eligible to use the alternative furnishing method with respect to the employee, furnish a Form 1095-C to the employee.</p>
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Furnishing Forms 1095-C to Employees

You will meet the requirement to furnish Form 1095-C to an employee if the form is properly addressed and mailed on or before the due date. If the due date falls on a weekend or legal holiday, then the due date is the following business day. A business day is any day that is not a Saturday, Sunday, or legal holiday.

An ALE member must furnish a Form 1095-C to each of its full-time employees by March 1, 2024, for the 2023 calendar year. See [*Extensions of time to furnish statements to recipients*](#), below.

For more information on alternative furnishing methods for employers, see [*Qualifying Offer Method*](#), later.

Filers of Form 1095-C may truncate the social security number (SSN) of an individual (the employee or any family member of the employee receiving coverage) on Form 1095-C statements furnished to employees by showing only the last four digits of the SSN and replacing the first five digits with asterisks (*) or Xs. Truncation is not allowed on forms filed with the IRS. In addition, an ALE Member's EIN may not be truncated on the statements furnished to employees or the forms filed with the IRS.

Except as provided below, statements must be furnished on paper by mail (or hand

delivered), unless the recipient affirmatively consents to receive the statement in an electronic format. If mailed, the statement must be sent to the employee's last known permanent address, or if no permanent address is known, to the employee's temporary address. For more information on furnishing statements to non-full-time employees and non-employees who are enrolled in employer-sponsored self-insured health coverage, see [Alternative manner of furnishing statements to non-full-time employees](#), later.

Consent to furnish statement

electronically. An ALE Member is required to obtain affirmative consent to furnish a statement electronically. This requirement ensures that statements are furnished electronically only to individuals who are able to access them. The consent must relate specifically to receiving the Form 1095-C electronically. An individual may consent on

paper or electronically, such as by email. If consent is on paper, the individual must confirm the consent electronically.

A statement may be furnished electronically by email or by informing the individual how to access the statement on the ALE Member's website. Statements reporting coverage and offers of coverage under an expatriate health plan, however, may be furnished electronically unless the recipient explicitly refuses to consent to receive the statement in an electronic format. Specific information on consents to furnish statements electronically can be found in Regulations section 301.6056-2.

Extensions of time to furnish statements to recipients. The due date for furnishing Form 1095-C is automatically extended from January 31, 2024, to March 1, 2024. Thus, no additional extensions will be granted.

Information reporting penalties. All employers subject to the employer shared

responsibility provisions and other employers that sponsor self-insured group health plans that fail to comply with the applicable information reporting requirements may be subject to the general reporting penalty provisions for failure to file correct information returns and failure to furnish correct payee statements. For returns required to be made and statements required to be furnished for 2023 tax year returns, the following apply.

- The penalty for failure to file a correct information return is \$310 for each return for which the failure occurs, with the total penalty for a calendar year not to exceed \$3,783,000.
- The penalty for failure to provide a correct payee statement is \$310 for each statement for which the failure occurs, with the total penalty for a calendar year not to exceed \$3,783,000.

- Special rules apply that increase the per-statement and total penalties if there is intentional disregard of the requirement to file the returns and furnish the required statements.

Penalties may be waived if the failure was due to reasonable cause and not willful neglect. See section 6724 and Regulations section 301.6724-1 and Regulations section 1.6055-1(h) (which relate to Form 1095-C, Part III). For additional information, see Pub. 1586.

Alternative manner of furnishing statements to non-full-time employees. If you are an ALE member that offers employer-sponsored, self-insured health coverage and meets the requirements of Regulations section 1.6055-1(g), you may use the alternative manner of furnishing statements to non-full-time employees and non-employees who are enrolled in the self-insured health coverage. To use the

alternative manner of furnishing statements, the following conditions must be met.

- The employer must provide clear and conspicuous notice, in a location on its website that is reasonably accessible to all individuals, stating that individuals may receive a copy of their statement upon request. The notice must include an email address, a physical address to which a request for a statement may be sent, and a telephone number that individuals may use to contact the employer with any questions. A notice posted on an employer's website must be written in plain, non-technical terms and with letters of a font size large enough, including any visual clues or graphical figures, to call to a viewer's attention that the information pertains to tax statements reporting that individuals had health coverage. For example, an employer's website provides a clear and conspicuous notice if it (1)

includes a statement on the main page, or a link on the main page, reading “Tax Information,” to a secondary page that includes a statement, in capital letters, “IMPORTANT HEALTH COVERAGE TAX DOCUMENTS”; (2) explains how non-full-time employees and non-employees who are enrolled in the plan may request a copy of Form 1095-C; and (3) includes the employer’s email address, mailing address, and telephone number.

- The employer must post the notice on its website by March 1, 2024, and retain the notice in the same location on its website through October 15, 2024.
- The employer must furnish the statement to a requesting individual within 30 days of the date the request is received. To satisfy this requirement, the employer may furnish the statement electronically if the recipient affirmatively consents.

Specific Instructions for Form 1094-C

Part I—Applicable Large Employer Member (ALE Member)

Line 1. Enter employer's name. The employer is the ALE Member.

Line 2. Enter the ALE Member's EIN. Do not enter an SSN. Enter the 9-digit EIN, including the dash.



If you are filing Form 1094-C, a valid EIN is required at the time the form is filed. If a valid EIN is not provided, Form 1094-C will not be processed. If you do not have an EIN, you may apply for one online. Go to [IRS.gov/EIN](https://www.irs.gov/ein). You may also apply by faxing or mailing Form SS-4, Application for Employer Identification Number, to the IRS. See the Instructions for Form SS-4 and Pub. 1635, Employer Identification Number.

Lines 3–6. Enter the ALE Member’s complete address (including room or suite no., if applicable). This address should match the ALE Member’s address used on Form 1095-C.

Lines 7 and 8. Enter the name and telephone number of the person to contact who is responsible for answering any questions from the IRS regarding the filing of, or information reported on, Form 1094-C or 1095-C. This may be different than the contact information on line 10 of Form 1095-C.

Note. If you are a Designated Governmental Entity (DGE) filing on behalf of an ALE Member, complete lines 9–16. If you are not a DGE filing on behalf of an ALE Member, do not complete lines 9–16. Instead, skip to line 18. See [Designated Governmental Entity \(DGE\)](#) in the *Definitions* section of these instructions.

Line 9. If a DGE is filing on behalf of the ALE Member, enter the name of the DGE.

Line 10. Enter the DGE's EIN (including the dash). Do not enter an SSN.



If you are a DGE that is filing Form 1094-C, a valid EIN is required at the time the return is filed. If a valid EIN is not provided, the return will not be processed. If the DGE does not have an EIN when filing Form 1094-C, it can get an EIN by applying online at [IRS.gov/EIN](https://www.irs.gov/ein) or by faxing or mailing a completed Form SS-4. See the Instructions for Form SS-4 and Pub. 1635.

Lines 11–14. Enter the DGE's complete address (including room or suite no.).

Lines 15 and 16. Enter the name and telephone number of the person to contact who is responsible for answering any questions from the IRS regarding the filing of, or information reported on, Form 1094-C.

Line 17. Reserved for future use.

Line 18. Enter the total number of Forms 1095-C submitted with this Form 1094-C transmittal.

Line 19. If this Form 1094-C transmittal is the Authoritative Transmittal that reports aggregate employer-level data for the ALE Member, check the box on line 19 and complete Parts II, III, and IV, to the extent applicable. Otherwise, complete the signature portion of Form 1094-C and leave the remainder of Parts II, III, and IV blank.

There must be only one Authoritative Transmittal filed for each ALE Member. If this is the only Form 1094-C being filed for the ALE Member, this Form 1094-C must report aggregate employer-level data for the ALE Member and be identified on line 19 as the Authoritative Transmittal. If multiple Forms 1094-C are being filed for an ALE Member so that Forms 1095-C for all full-time employees of the ALE Member are not attached to a single Form 1094-C transmittal (because

Forms 1095-C for some full-time employees of the ALE Member are being transmitted separately), one (and only one) of the Forms 1094-C must report aggregate employer-level data for the ALE Member and be identified on line 19 as the Authoritative Transmittal. For more information, see [*Authoritative Transmittal for ALE Members Filing Multiple Forms 1094-C*](#), earlier.

Part II—ALE Member Information

Reminder. Lines 20–22 should be completed only on the Authoritative Transmittal for the ALE Member. For more information, see [*Authoritative Transmittal for ALE Members Filing Multiple Forms 1094-C*](#), earlier.

Line 20. Enter the total number of Forms 1095-C that will be filed by, and/or on behalf of, the ALE Member. This includes all Forms 1095-C that are filed with this transmittal, including those filed for individuals who enrolled in the employer-sponsored, self-

insured plan, if any, and for any Forms 1095-C filed with a separate transmittal filed by, or on behalf of, the ALE Member.

Line 21. If during any month of the calendar year the ALE Member was a member of an Aggregated ALE Group, check "Yes." If you check "Yes," also complete the "Aggregated Group Indicator" in Part III, column (d), and then complete Part IV to list the other members of the Aggregated ALE Group. If, for all 12 months of the calendar year, the employer was not a member of an Aggregated ALE Group, check "No," and do not complete Part III, column (d), or Part IV.

Line 22. If the ALE Member meets the eligibility requirements and is using one of the Offer Methods, it must check the applicable box. See the descriptions of [Qualifying Offer Method](#) and [98% Offer Method](#), later.

Qualifying Offer Method. Check this box if the ALE Member is eligible to use, and is

using, the Qualifying Offer Method to report the information on Form 1095-C for one or more full-time employees. Under the Qualifying Offer Method, there is an alternative method of completing Form 1095-C and an alternative method for furnishing Form 1095-C to certain employees. If the ALE Member is using either of these alternative rules, check this box. To be eligible to use the Qualifying Offer Method, the ALE Member must certify that it made a Qualifying Offer to one or more of its full-time employees for all months during the year in which the employee was a

full-time employee for whom an employer shared responsibility payment could apply. Additional requirements described below must be met to be eligible to use the alternative method for furnishing Form 1095-C to employees under the Qualifying Offer Method.

Alternative method of completing Form 1095-C under the Qualifying Offer

Method. If the ALE Member reports using this method, it must not complete Form 1095-C, Part II, line 15, for any month for which a Qualifying Offer is made. Instead, it must enter the Qualifying Offer code 1A on Form 1095-C, line 14, for any month for which the employee received a Qualifying Offer (or in the " All 12 Months" box if the employee received a Qualifying Offer for all 12 months), and must leave line 15 blank for any month for which code 1A is entered on line 14. The ALE Member may, but is not required to, enter an applicable code on line 16 for any month for which code 1A is entered on line 14; a Qualifying Offer is, by definition, treated as an offer that falls within an affordability safe harbor even if no code is entered on line 16.

An ALE Member is not required to use the Qualifying Offer Method even if it is eligible, and instead may enter on line 14 the applicable offer code and then enter on line 15 the Employee Required Contribution.



If the ALE Member is eligible to use the Qualifying Offer Method, it may report on Form 1095-C by entering the Qualifying Offer code 1A on Form 1095-C, line 14, for any month for which it made a Qualifying Offer to an employee, even if the employee did not receive a Qualifying Offer for all 12 calendar months. However, if an employee receives a Qualifying Offer for less than all 12 months, the ALE Member must furnish a copy of Form 1095-C to the employee (rather than using the alternative method of furnishing Form 1095-C described later).

Example. Employee's employment with Employer begins on January 1. Employee is in a health coverage waiting period (and an employer shared responsibility payment could not apply with respect to Employee, because Employee is in a Limited Non-Assessment Period) until April 1 and is a full-time employee for the remainder of the calendar

year. Employer makes a Qualifying Offer to Employee for coverage beginning on April 1 and for the remainder of the calendar year. Employer is eligible to use the Qualifying Offer method because it has made a Qualifying Offer to at least one full-time employee for all months in which both (1) the employee was a full-time employee, and (2) an employer shared responsibility payment could apply with respect to the employee. Employer may use the alternative method of completing Form 1095-C under the Qualifying Offer Method for this Employee. However, Employer may not use the alternative method of furnishing Form 1095-C to Employee under the Qualifying Offer Method because Employee did not receive a Qualifying Offer for all 12 months of the calendar year.

Alternative method of furnishing Form 1095-C to employees under the Qualifying Offer Method. An ALE Member that is eligible to use the Qualifying Offer

Method may use the alternative method of furnishing Form 1095-C only for a full-time employee who (1) received a Qualifying Offer for all 12 months of the calendar year, and (2) did not enroll in employer-sponsored, self-insured coverage. For such an employee, an ALE Member meets its obligation to furnish a Form 1095-C to the employee if it furnishes the employee a statement containing the following information.

- Employer/ALE Member name, address, and EIN.
- Contact name and telephone number at which the employee may receive information about the offer of coverage and the information on the Form 1095-C filed with the IRS for that employee.
- Notification that, for all 12 months of the calendar year, the employee and his or her spouse and dependents, if any, received a Qualifying Offer and therefore

the employee is not eligible for a premium tax credit.

- Information directing the employee to see Pub. 974, Premium Tax Credit (PTC), for more information on eligibility for the premium tax credit.

An ALE Member is not required to use the alternative method of furnishing for an employee even if the alternative method would be allowed. Instead, the ALE Member may furnish a copy of Form 1095-C as filed with the IRS (with or without the statement described earlier).

As stated earlier, an ALE Member may **not** use the alternative furnishing method for a full-time employee who enrolled in self-insured coverage. Rather, the ALE Member must furnish Form 1095-C, including the information reporting enrollment in the coverage on Form 1095-C, Part III.

B. Reserved for future use.

C. Reserved for future use.

D. 98% Offer Method. Check this box if the employer is eligible for, and is using, the 98% Offer Method. To be eligible to use the 98% Offer Method, an employer must certify that, taking into account all months during which the individuals were employees of the ALE Member and were not in a Limited Non-Assessment Period, the ALE Member offered affordable health coverage providing minimum value to at least 98% of its employees for whom it is filing a Form 1095-C employee statement, and offered minimum essential coverage to those employees' dependents. The ALE Member is not required to identify which of the employees for whom it is filing were full-time employees, but the ALE Member is still required, under the general reporting rules, to file Forms 1095-C on behalf of all its full-time employees who were full-time employees for one or more

months of the calendar year. To ensure compliance with the general reporting rules, an ALE Member should confirm for any employee for whom it fails to file a Form 1095-C that the employee was not a full-time employee for any month of the calendar year. For this purpose, the health coverage is affordable if the ALE Member meets one of the section 4980H affordability safe harbors.

Example. Employer has 325 employees. Of those 325 employees, Employer identifies 25 employees as not possibly being full-time employees because they are scheduled to work 10 hours per week and are not eligible for additional hours. Of the remaining 300 employees, 295 are offered affordable minimum value coverage for all periods during which they are employed other than any applicable waiting period (which qualifies as a Limited Non-Assessment Period). Employer files a Form 1095-C for each of the

300 employees (excluding the 25 employees that it identified as not possibly being full-time employees). Employer may use the 98% Offer Method because it makes an affordable offer of coverage that provides minimum value to at least 98% of the employees for whom Employer files a Form 1095-C. Using this method, Employer does not identify whether each of the 300 employees is a full-time employee. However, Employer must still file a Form 1095-C for all of its full-time employees. Employer chooses to file a Form 1095-C on behalf of all 300 employees, including the five employees to whom it did not offer coverage, because if one or more of those employees was, in fact, a full-time employee for one or more months of the calendar year, Employer would be required to have filed a Form 1095-C on behalf of those employees.

Note. If an ALE Member uses the 98% offer method, it is not required to complete the

“Section 4980H Full-Time Employee Count for ALE Member” in Part III, column (b).

Part III—ALE Member Information—Monthly (Lines 23– 35)

Column (a)—Minimum Essential Coverage Offer Indicator.

- If the ALE Member offered minimum essential coverage, including an individual coverage HRA, to at least 95% of its full-time employees and their dependents for the entire calendar year, enter “X” in the “Yes” checkbox on line 23 for “All 12 Months” or for each of the 12 calendar months.
- If the ALE Member offered minimum essential coverage, including an individual coverage HRA, to at least 95% of its full-time employees and their dependents only for certain calendar months, enter “X” in

the “Yes” checkbox for each applicable month.

- For the months, if any, for which the ALE Member did not offer minimum essential coverage, including an individual coverage HRA, to at least 95% of its full-time employees and their dependents, enter “X” in the “No” checkbox for each applicable month.
- If the ALE Member did not offer minimum essential coverage, including an individual coverage HRA, to at least 95% of its full-time employees and their dependents for any of the 12 months, enter “X” in the “No” checkbox for “All 12 Months” or for each of the 12 calendar months.

Note. For purposes of column (a), an employee in a Limited Non-Assessment Period is not counted in determining whether minimum essential coverage was offered to at least 95% of an ALE Member’s full-time

employees and their dependents. For a description of the differences between the definition of the term “Limited Non-Assessment Period” used with respect to section 4980H(a) and the definition used with respect to section 4980H(b), relating to whether the ALE Member offers minimum value coverage at the end of the Limited Non-Assessment Period, see the [Definitions](#) section.



An employee who is treated as having been offered health coverage, including an individual coverage HRA, for purposes of section 4980H (even though not actually offered) is treated as offered minimum essential coverage for this purpose. For example, for the months for which the ALE Member is eligible for multiemployer arrangement interim guidance (if the ALE Member is contributing on behalf of an employee whether or not the employee is eligible for coverage under the multiemployer

plan) with respect to an employee, that employee should be treated as having been offered minimum essential coverage for purposes of column (a). For different rules for purposes of reporting offers of coverage on Form 1095-C, see the specific instructions for Form 1095-C, Part II, [line 14](#).



For purposes of column (a), if the ALE Member offered minimum essential coverage to all but five of its full-time employees and their dependents, and five is greater than 5% of the number of full-time employees of the ALE Member, the ALE Member may report in column (a) as if it offered health coverage to at least 95% of its full-time employees and their dependents (even if it offered health coverage to less than 95% of its full-time employees and their dependents, for example, to 75 of its 80 full-time employees and their dependents).

See [Definitions](#), later, for more information on an offer of health coverage.

Column (b)—Section 4980H Full-Time Employee Count for ALE Member. Enter the number of full-time employees for each month, but do not count any employee in a Limited Non-Assessment Period. If the number of full-time employees (excluding employees in a Limited Non-Assessment Period) for a month is zero, enter -0-. An employee should be counted as a full-time employee for a month if the employee satisfied the definition of “full-time employee” under the monthly measurement method or the look-back measurement method (as applicable) on any day of the month. See [*Full-time employee*](#) and [*Limited Non-Assessment Period*](#) in the *Definitions* section. Be sure to use the section 4980H definition and not any other definition of the term “full-time employee” that you may use for other purposes.

Example. Employer uses the look-back measurement method to determine the full-

time status of its employees. Employee, who is not in a Limited Non-Assessment Period, averaged over 130 hours of service per month during the measurement period that corresponds with the stability period starting January 1, 2023, and ending December 31, 2023. Employee terminates employment with Employer on February 15, 2023. Employer must include Employee in the number of full-time employees reported in column (b) for January and February. See the description of code 2B in the instructions for [line 16](#) of Form 1095-C, later, for rules for reporting an offer of coverage in an employee's final month of employment.

Note. If the ALE Member certified that it was eligible for the 98% Offer Method by selecting box D, on line 22, it is not required to complete column (b).

Column (c)—Total Employee Count for ALE Member. Enter the total number of all of the ALE Member's employees, including full-

time employees and non-full-time employees, and employees in a Limited Non-Assessment Period, for each calendar month. An ALE Member must choose to use one of the following days of the month to determine the number of employees per month and must use that day for all months of the year: (1) the first day of each month, (2) the last day of each month, (3) the 12th day of each month, (4) the first day of the first payroll period that starts during each month, or (5) the last day of the first payroll period that starts during each month (provided that for each month that last day falls within the calendar month in which the payroll period starts). If the total number of employees was the same for every month of the entire calendar year, enter that number in line 23, column (c), "All 12 Months," or in the boxes for each month of the calendar year. If the number of employees for any month is zero, enter -0-.

Column (d)—Aggregated Group

Indicator. An ALE Member must complete this column if it checked “Yes” on line 21, indicating that, during any month of the calendar year, it was a member of an Aggregated ALE Group. If the ALE Member was a member of an Aggregated ALE Group during each month of the calendar year, enter “X” in the “All 12 Months” box or in the boxes for each of the 12 calendar months. If the ALE Member was not a member of an Aggregated ALE Group for all 12 months but was a member of an Aggregated ALE Group for one or more month(s), enter “X” in each month for which it was a member of an Aggregated ALE Group. If an ALE Member enters “X” in one or more months in this column, it must also complete Part IV.

Part IV—Other ALE Members of Aggregated ALE Group (Lines 36–65)

An ALE Member must complete this section if it checks “Yes” on line 21. If the ALE Member was a member of an Aggregated ALE Group (with other ALE Members) for any month of the calendar year, enter the name(s) and EIN(s) of up to 30 of the other Aggregated ALE Group members (not including the reporting ALE Member). If there are more than 30 members of the Aggregated ALE Group (not including the reporting ALE Member), enter the 30 with the highest monthly average number of full-time employees (using the number reported in Part III, column (b), if a number was required to be reported) for the year or for the number of months during which the ALE Member was a member of the Aggregated ALE Group. If any member of the Aggregated ALE Group uses the 98% Offer Method and thus is not

required to identify which employees are full-time employees, all ALE Members of the Aggregated ALE Group should use the monthly average number of total employees rather than the monthly average number of full-time employees for this purpose.

Regardless of the number of members in the Aggregated ALE Group, list only the 30 members in descending order, listing first the member with the highest average monthly number of full-time employees (or highest average number of total employees, if any member of the Aggregated ALE Group uses the 98% Offer Method), but do not include the reporting ALE Member. The reporting ALE Member must also complete Part III, column (d), to indicate which months it was part of an Aggregated ALE Group.



If you are filing Form 1094-C, a valid EIN is required at the time it is filed.

If a valid EIN is not provided, Form 1094-C will not be processed. If you do not have an EIN, you may apply for one online. Go to [IRS.gov/EIN](https://www.irs.gov/ein). You may also apply by faxing or mailing Form SS-4 to the IRS. See the Instructions for Form SS-4 and Pub. 1635.

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